

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 03/01/09

| (1) Coverage | (2) Statewide Annual Premium Volume * | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire & Allied | \$383,312 | -9.0% |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory(s) or certain class(s)? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adoption of ISO's Commercial Fire and Allied Lines Loss Costs , reference document LI-CF-2008-RLA1.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

AIG Casualty Company

Name of Company

Joan D. Baskerville, Filings Analyst

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 2-1-09

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | 49,761 | -0.2% |
| 10. Extended Coverage | 57,111 | -0.2% |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Withdrawing our Restaurant rule. Revising our Time Element Coverage for Business Income and Business Income and Extra Expense to provide free coverage for Restaurants and Food Delivery risks that meet certain criteria. Currently under the Restaurant Plus rule, risks receive only 4 months of BI/ALS coverage and under the updated Time Element for Business Income and Extra Expense rule they will receive 12 months of free coverage.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

All America Ins. Co.

Name of Company

Mrs. Petrise Meyer
Sr Rates and Forms Analyst,

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective March 1, 2009

| (1) <u>Coverage</u> | | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|------------------------|----------------------------|---|---|
| 1. | Automobile Liability | | |
| | Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | 333,766 | -2.4 |
| 10. | Extended Coverage | 99,319 | -2.4 |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Total of All Other | 2,840,171 | 0 |
| | Commercial Property | | |
| | Coverages & Programs | | |
| | Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Commercial Property - Adopt ISO Loss Cost Revision - CF-2008-RLA1

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

American Automobile
Insurance Company
Name of Company

Helen Jee, Regulatory
Analyst
Official - Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 03/01/09

| (1) Coverage | (2) Statewide Annual Premium Volume * | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire & Allied | \$532,886 | -9.0% |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory(s) or certain class(s)? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adoption of ISO's Commercial Fire and Allied Lines Loss Costs , reference document LI-CF-2008-RLA1.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

American Home Assurance Company
Name of Company

Joan D. Baskerville, Filings Analyst
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective March 1, 2009

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | 415,343 | -4.2 |
| 10. Extended Coverage | 135,163 | -4.2 |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other Total of All Other | 1,748,198 | 0 |
| Commercial Property | | |
| Coverages & Programs | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Commercial Property - Adopt ISO Loss Cost Revision - CF-2008-RLA1

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

The American Insurance
Company

Name of Company

Helen Jee, Regulatory
Analyst

Official - Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 03/01/09

| (1) Coverage | (2) Statewide Annual Premium Volume * | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire & Allied | \$9,116 | -9.0% |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory(s) or certain class(s)? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adoption of ISO's Commercial Fire and Allied Lines Loss Costs , reference document LI-CF-2008-RLA1.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

American International South Insurance Company
Name of Company

Joan D. Baskerville, Filings Analyst
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective March 1, 2009

| (1) Coverage | | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-----------------|----------------------------|---|-------------------------------------|
| 1. | Automobile Liability | | |
| | Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | 87,371 | -10.2 |
| 10. | Extended Coverage | 39,824 | -10.2 |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Total of All Other | 73,957 | 0 |
| | Commercial Property | | |
| | Coverages & Programs | | |
| | Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Commercial Property - Adopt ISO Loss Cost Revision - CF-2008-RLA1

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Associated Indemnity
Corporation

Name of Company

Helen Jee, Regulatory
Analyst

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 2-1-09

| (1) | (2) | (3) |
|-------------------------------|--------------------------------------|------------------------------|
| Coverage | Annual Premium Volume (Illinois)* | Percent Change (+ or -)** |
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | 247,728 | -0.2% |
| 10. Extended Coverage | 181,560 | -0.2% |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Withdrawing our Restaurant rule. Revising our Time Element Coverage for Business Income and Business Income and Extra Expense to provide free coverage for Restaurants and Food Delivery risks that meet certain criteria. Currently under the Restaurant Plus rule, risks receive only 4 months of BI/ALS coverage and under the updated Time Element for Business Income and Extra Expense rule they will receive 12 months of free coverage.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Central Mutual Insurance

Name of Company

Mrs. Petrise Meyer
Sr Rates and Forms Analyst,

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

04/01/09

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|---------------------------------|---|---|
| 1. Automobile Liability Private | | |
| Passenger Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | 79,101 | -13.5% |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of ISO loss cost circular CF-2007-RLA1

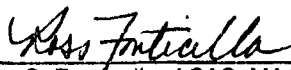
Revision of loss cost multiplier from 1.730 to 1.783

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Erie Insurance Exchange

Name of Company



Ross C. Fonticella, ACAS, MAAA

Vice President and Manager

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective March 1, 2009

| (1) <u>Coverage</u> | | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|------------------------|---------------------------------|---|---|
| 1. | Automobile Liability | | |
| | Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | 202,253 | -1.8 |
| 10. | Extended Coverage | 153,208 | -1.8 |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Total of All Other | 2,625,690 | 0 |
| | Commercial Property | | |
| | <u>Coverages & Programs</u> | | |
| | <u>Line of Insurance</u> | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Commercial Property - Adopt ISO Loss Cost Revision - CF-2008-RLA1

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Fireman's Fund Insurance
Company

Name of Company

Helen Jee, Regulatory
Analyst

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 12-1-08 New; 1-6-09 Renewal.

| | (1) Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|-----|--|--|------------------------------------|
| 1. | Automobile Liability Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damag Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | \$5,898,478 | +0.07% |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Life of Insurance | | |

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: Yes, only Dwelling Property policies with Earthquake coverage.

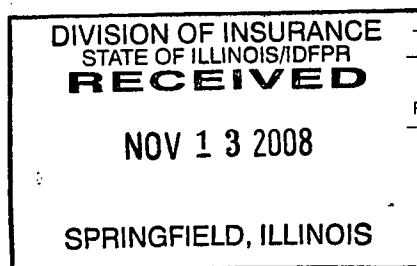
Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): Revise Dwelling Property Earthquake coverage rates & rules.

Earthquake rating territory 26 will now be subject to a 10% earthquake deductible and the 5% deductible option is no longer available.

Also included is a 10% rate increase to all earthquake rates.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.



THE FARMERS AUTOMOBILE INSURANCE ASSOCIATION

Name of Company

R.M. MCGANN - Director of Pricing & Regulatory Filings, Assistant Secretary

Official - Title

FILING# PKNS-125888960

Form (RF-3)

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 1/1/09

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | \$5,329,685 | +4.9 |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Loss Cost Multipliers revised for Commercial Fire, General Liability and Crime coverages.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Frankenmuth Mutual Insurance Com
Name of Company

Shelly Hawes
R&D Senior Associate
Official - Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 03/01/09

| (1) Coverage | (2) Statewide Annual Premium Volume * | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire & Allied | \$4,298,002 | -9.0% |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory(s) or certain class(s)? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adoption of ISO's Commercial Fire and Allied Lines Loss Costs , reference document LI-CF-2008-RLA1.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Granite State Insurance Company
Name of Company

Joan D. Baskerville, Filings Analyst
Official - Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 03/01/09

| (1) Coverage | (2) Statewide Annual Premium Volume * | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire & Allied | \$1,744 | -9.0% |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory(s) or certain class(s)? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adoption of ISO's Commercial Fire and Allied Lines Loss Costs , reference document LI-CF-2008-RLA1.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Illinois National Insurance Co.

Name of Company

Joan D. Baskerville, Filings Analyst

Official - Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 03/01/09

| (1) Coverage | (2) Statewide Annual Premium Volume * | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire & Allied | \$1,452,173 | -9.0% |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory(s) or certain class(s)? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adoption of ISO's Commercial Fire and Allied Lines Loss Costs , reference document LI-CF-2008-RLA1.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

The Insurance Company of the State of Pennsylvania
Name of Company

Joan D. Baskerville, Filings Analyst
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective March 1, 2009

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | 239,409 | -1.9 |
| 10. Extended Coverage | 138,969 | -1.9 |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other Total of All Other | 2,748,794 | 0 |
| Commercial Property | | |
| Coverages & Programs | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Commercial Property - Adopt ISO Loss Cost Revision - CF-2008-RLA1

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

National Surety Corporation

Name of Company

Helen Jee, Regulatory
Analyst

Official - Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 03/01/09

| (1) Coverage | (2) Statewide Annual Premium Volume * | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire & Allied | \$385,691 | -9.0% |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory(s) or certain class(s)? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adoption of ISO's Commercial Fire and Allied Lines Loss Costs , reference document LI-CF-2008-RLA1.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

New Hampshire Insurance Company
Name of Company

Joan D. Baskerville, Filings Analyst
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 5/1/2008

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|---|---|---|
| 1. Automobile Liability Private Passenger Commercial | | |
| 2. Automobile Physical Damage Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | 336,019 | -24.1% |
| 10. Extended Coverage | 398,170 | 1.3% |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No, we adopting Loss Costs
 for all fire and allied lines territories, however, this applies to Riverport Insurance Company, Human Services business.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting
the ISO Fire and Allied Lines Illinois Loss Cost Revision CF-2008-RLA1 effective March 1, 2009. Our percentage of change number is
based on the impact of the ISO change on our specific business. The total overall change is -11.2%.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Riverport Insurance Company

Name of Company

Terri Zachman - Product Development Analyst

Official - Title

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

March 1, 2009

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | \$92,865 | -9.0% |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Rating Organization: Insurance Services Office, Inc. (ISO)

CF-2008-RLA1, Commercial Fire and Allied Lines Advisory Prospective Loss Cost Revision

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Stonington Insurance Company

Name of Company

Senior Counsel – Compliance Manager

Official - Title

H29219D

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective March 1, 2009

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|---|---|---|
| 1. Automobile Liability Private Passenger Commercial | | |
| 2. Automobile Physical Damage Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | \$33,525 | -9.0% |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other _____ Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO reference filing CF-2008-RLA1

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

SUA Insurance Company

Name of Company

Michael Gooding, Director of Regulatory Affairs & Legal Com

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective March 1, 2009

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|-------------------------------|---|---|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | 122,307 | -18.7% |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| <u>Line of Insurance</u> | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Adoption of ISO Loss Costs filing
designation number CF-2008-RLA1.

We request that this filing be applicable
to all policies effective on or after
March 1, 2009.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

TRANSGUARD INSURANCE COMPANY OF AMERICA, INC.

Name of Company

Joyelle Endres, AIS, API, IR - Compliance Support Analyst
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective January 1, 2009.

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|-------------------------------|---|---|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | 122,307 | -18.7% |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| <u>Line of Insurance</u> | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: NO

Brief description of filing. (If filing follows rates of an advisory

organization, specify organization): In accordance with the regulatory provisions of your state, we hereby adopt the following ISO - Insurance Services Office, Inc. filing designation number:

| FILING DESIGNATION # | TITLE |
|----------------------|---|
| CF-2007-RLC07 | ILLINOIS - COMMERCIAL PROPERTY LOSS COST IN SUPPORT OF GENERAL MULTISTATE REVISION TO BE IMPLEMENTED |
| CF-2007-RLA1 | ILLINOIS COMMERCIAL FIRE AND ALLIED LINES ADVISORY PROSPECTIVE LOSS COST REVISION FURNISHED FOR USE |

This filing is being submitted under your Use & File statute. We request that this filing be applicable to all policies effective on or after January 1, 2009.

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

TRANSGUARD INSURANCE COMPANY OF AMERICA, INC.

Name of Company

Joyelle Endres, AIS, API, IR - Compliance Support Analyst

Official - Title

H29219D